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CONFIRMATION NO. 2020

SERIAL NUMBER 10/811,172	FILING DATE 03/26/2004 RULE	CLASS 399	GROUP ART UNIT 2854	ATTORNEY DOCKET NO. 2003-0781.02/4670- 275
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APPLICANTS

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** CONTINUING DATA *****

RY None

** FOREIGN APPLICATIONS *****

RY

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/10/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no				
Verified and Acknowledged	Allowance RY Examiner's Signature Initials	KY	DRAWING 8	CLAIMS 44	CLAIMS 7

ADDRESS

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TITLE

Image forming device with multimode duplexer

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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